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Wieldan, VA 22	.102				atricia Munoz	(Depositor's name)
			_		the Mund	(Signature)
APPLICATION NO. FILING DATE					mber 20, 2007 /	(Date)
09/804,409	93/12/2001		FIRST NAMED INVENTO	OR A	TTORNEY DOCKET NO.	CONFIRMATION NO.
		D METHODS FOR REC	Timothy J. Kieffer 029996/0278721 1113 GULATED PROTEIN EXPRESSION IN GUT			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FI	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$720	\$300	\$0	\$1020	01/28/2008
EXAMI		ART UNIT	CLASS-SUBCLASS	7		
KELLY, ROBERT M 1633 1. Change of correspondence address or indication of "Fee Addre		1633	514-044000	_		
CFK 1.505).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Pittman LLP			
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AN	D RESIDENCE DATA	TO BE PRINTED ON T	THE PATENT (print or ty	pe)		
PLEASE NOTE: Unle recordation as set forth	ss an assignee is identif in 37 CFR 3.11. Compl	fied below, no assignee letion of this form is NO	data will appear on the p	patent. If an assignee is	s identified below, the doc	ument has been filed for
(A) NAME OF ASSIGNEE			e data will appear on the patent. If an assignee is identified below, the document has been filed for DT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)			
ENGENE, INC.			VANCOUVER, BRITISH COLUMBIA, CANADA			
Please check the appropria	te assignee category or c	categories (will not be pri		Individual 🖾 Corpor	ation or other private group	entity [] Covernment
4a. The following fee(s) ar ✓ Issue Fee			cinted on the patent): Individual Corporation or other private group entity Government D. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above)			
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5. Change in Entity Status a. Applicant claims S	SMALL ENTITY status.	See 37 CFR 1 27	h Applicant is no lon-	vor eleimin - Chiatt m	VIDION	
NOTE: The Issue Fee and I interest as shown by the rec	Publication Fee (if required States	red) will not be accepted	from anyone other than the	ne applicant; a registered	d attorney or agent; or the a	1.27(g)(2).
Authorized Signature	1/1	nd Ih	4/		ovember 20, 2007	
Typed or printed name	Robert M. Bed	dgood /		Registration No.		
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